

THE IMPACT OF SOCIAL ISOLATION IN MEDWAY

**A report prepared by a Task Group of the Health and Adult Social
Care Overview and Scrutiny Committee**

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The Impact of Social Isolation in Medway

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1. FOREWORD

- 1.1 On behalf of the Health and Adult Social Care Overview and Scrutiny Committee, we are pleased to present the review entitled 'The Impact of Social Isolation', with its associated recommendations, to Medway Council's Cabinet.
- 1.2 The work of the Task Group has considered the impact of social isolation and loneliness on Medway Council, particularly from a Public Health and Adult Social Care perspective. More importantly, careful consideration has been given to the impact on Medway residents. As reflected in the newly published national loneliness strategy, it is recognised that "the challenge of creating a more connected community and tackling isolation and loneliness lies with each of us in our families, neighbourhoods and workplaces¹". However, there is much that the Council, working in partnership with national government, partners and local residents can do to support Medway be a connected community. The Task Group hopes that the recommendations contained in the report will act as a catalyst to further tackling social isolation and loneliness in Medway.
- 1.3 The Task Group would like to thank all the witnesses who helped it to gather evidence at one its meetings, particularly those representing external organisations, for the time they have given to the Task Group and most importantly, for the invaluable information they provided. The Task Group would also like to thank Bracknell Forest Council for hosting a visit that enabled the Task Group to see first hand the variety of work undertaken to tackle social isolation and loneliness in Bracknell Forest.

¹ A Connected Society: A Strategy for tackling loneliness. HM Government, 2018; p3.

The Task Group



Councillor Purdy (Chairman)



Cllr Aldous



Cllr McDonald



Cllr Price



Cllr Wildey

2. EXECUTIVE SUMMARY

- 2.1 Social isolation and loneliness are important issues in view of the impact that they can have upon an individuals' quality of life and wellbeing, adversely affecting health and increasing their use of health and social care services.
- 2.2 Social Isolation and Loneliness (see 4.2 for definitions) are distinct, but closely related concepts, with it being possible to be socially isolated but not lonely or vice-versa. Although the title of the Task Group is 'The Impact of Social Isolation in Medway', the Task Group anticipates that the recommendations will help to address both social isolation and loneliness in Medway.
- 2.3 It is clear that there is already a significant amount of work being undertaken across Medway to reduce social isolation and loneliness. However, a key concern highlighted to the Task Group was that this work is not always as joined up as it could be and that there is a need to strengthen communications between the Council and other local organisations and to ensure that the local offer is promoted effectively. It is anticipated that the existing Social Isolation Network that meets regularly at the Council will have an important role to play in increasing local connectedness and bringing partners together.
- 2.4 The Government's publication of its first Loneliness Strategy in October 2018 The Strategy emphasises the importance of many of the initiatives already taking place or planned in Medway, such as social prescribing and also recognises the role of local authorities in tackling loneliness through strategic planning and decision making. As the Government Strategy was published after the Task Group had concluded its evidence gathering, an additional recommendation has been made for it to be reviewed against the Task Group's recommendations to seek alignment, identify gaps and avoid unnecessary duplication.
- 2.5 The Task Group hopes that its recommendations will act as a catalyst to further tackling social isolation and loneliness in Medway. The full conclusions and list of recommendations of the Task Group are set out in section seven of this report.

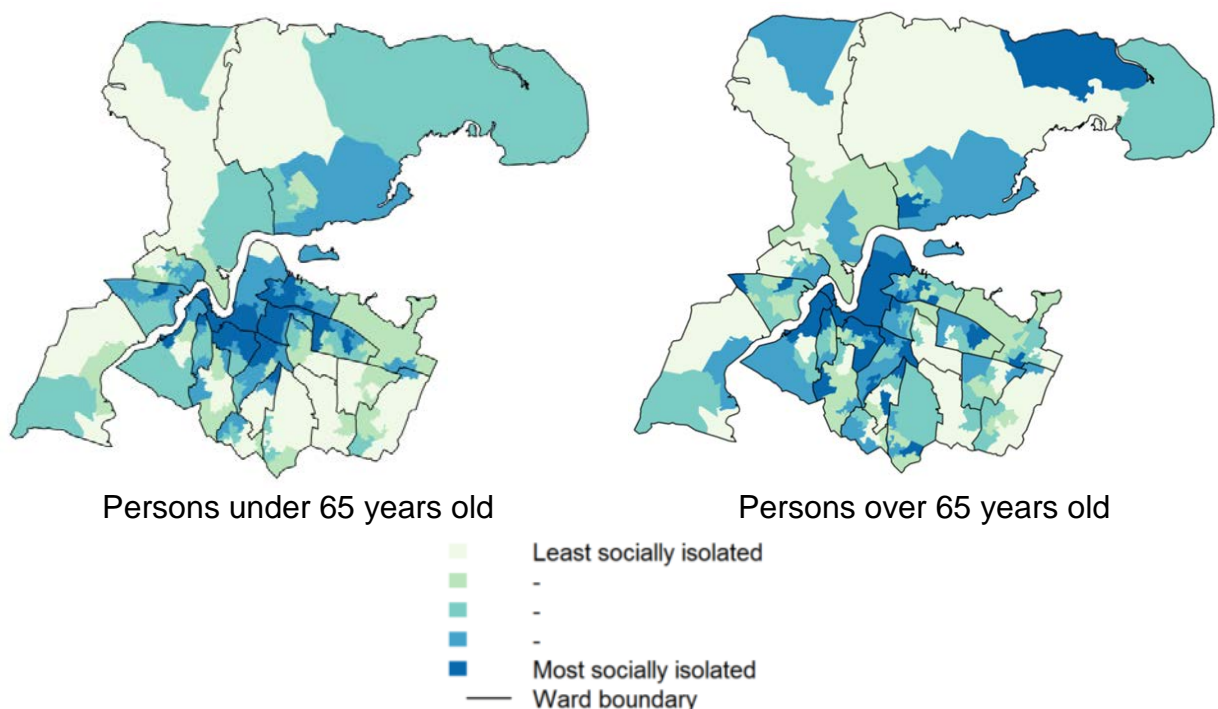
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3. BACKGROUND

3.1 Headline statistics:

- The Community Life Survey 2017/18 found that 6% (over 1 in 20 people) aged 16 or over in England are often or always lonely, while 15% reported feeling lonely some of the time and nearly a quarter (24%) felt lonely some of the time.
- Loneliness does not just affect older people. The survey found that younger adults aged 16 to 24 reported feeling lonely more often than older age groups with 8% feeling lonely often or always.
- The three groups of people most at risk of reporting often / always feeling lonely were older widowed home owners with long term health conditions; middle aged single people with long term health conditions and; younger renters with little sense of trust or belonging to their communities.
- Based on the national figure of 6% of adults being lonely, it is estimated that within Medway, 16,657 people aged 16 plus are always or often lonely (Based on mid-year 2017 Medway population estimate of 277,616.)
- In 2017/18, 47.7% of users of adult social care services in Medway reported that they had as much social contact as they would like. This is an improvement on the results from the Adult Social Care survey of the previous three years and is now above the national figure of 46%.
- 2016/17 data also showed that just 29.5% of adult carers reported that they had as much social contact as they would like, which was significantly lower than in previous years. Although this value has also decreased nationally, a significantly lower percentage of adult carers report having as much social contact as they would like in Medway, compared to England.

Estimated levels of Social Isolation in Medway



3.2 Choosing a Review Topic

The Council's Business Support Overview and Scrutiny Committee agreed in November 2017 that an in-depth review should be undertaken on 'The Impact of Social Isolation for the Council.'

3.3 The review topic was chosen due to the impact that social isolation and loneliness have upon an individuals' quality of life and wellbeing, adversely affecting health and increasing their use of health and social care services.

3.4 The Medway Health and Wellbeing Board has prioritised social isolation. This led to the development of a 'Strategy to reduce Social Isolation 2014-2018'. This prioritisation was also a factor in the identification of social isolation as a topic for this Task Group. An overview of some of the key actions taken against each of the themes in the strategy, since its publication is provided in paragraphs 4.24 to 4.26 of this report. The importance that the Council and its partners attach to addressing social isolation is also highlighted in the refreshed Joint Health and Wellbeing Strategy 2018-2023 (see 4.28)

3.5 The existing Social Isolation Strategy covered the period until 2018 so it was considered that there was a need to review progress in addressing social isolation and loneliness to date and how the Council and other organisations can successfully address and reduce isolation going forward. This includes ensuring that new ways of working and technology are used effectively.

4. SETTING THE CONTEXT

4.1 Definition of Social Isolation

The inadequate quality and quantity of social relations with other people at the different levels where human interaction takes place (individual, group, community and the larger social environment).¹

4.2 Definition of Loneliness

An emotional perception that can be experienced by individuals regardless of the breadth of their social networks.²

4.3 The concepts of social isolation and loneliness are frequently used interchangeably but are defined as two distinct concepts. It is possible to be socially isolated and not feel lonely, for example, someone who prefers not to interact with others. It is also possible to be lonely but not socially isolated, for example, a person in a crowded room who feels they have nothing in common with the people around them.

4.4 While the title of this Task Group is ‘The Impact of Social Isolation in Medway’, the Task Group acknowledges that it is important that its recommendations help to address both social isolation and loneliness in view of the strong links between the two concepts and the fact that much of the work and policy development taking place at national level focuses on loneliness.

National Policies, Strategies and Guidance

4.5 Combatting Loneliness One Conversation at a Time – a Call to Action, Jo Cox Commission on Loneliness

The cross party Commission was established by the MP Jo Cox, with the work of the Commission having been continued following her death. It worked with 13 charities including Age UK and Action for Children to come up with ideas for change. The Commission called for the creation of a National Strategy for Loneliness. Following publication of the report in December 2017, Tracey Crouch MP was appointed as the first Minister for Loneliness in January 2018.

4.6 The report acknowledged that Government action alone cannot solve the problem and suggested that tackling loneliness is a generational challenge that can only be met by concerted action by everyone and that governments, employers, business, civil society organisations, families, communities and individuals all have a role to play.

4.7 The Loneliness Strategy proposed by the Jo Cox Commission is anticipated as being a first step by Government towards tackling the long-term challenge of loneliness. The Strategy was published in October 2018 (see 4.9). The

¹ Future Cities Catapult (2017) Social isolation in the UK with a focus on the use of technology to tackle these conditions

² Local Government Association (2017). Combatting loneliness. A guide for local authorities.

Government has also been working with partners to explore how the evidence base can be improved in order to inform future Government policy.

4.8 The Office for National Statistics (ONS) has found the following to be significant factors in determining the likelihood of an individual experiencing loneliness¹:

- Age - younger people (16-24) were significantly more likely to report feeling lonely.
- Gender - women were more likely to report feeling lonely.
- Marital status - widowed people were more likely to report feeling lonely.
- Disability and ill-health (self-reported) - those reporting were more likely to feel lonely.
- Number of adults in the household - those living alone were more likely to report feeling lonely.
- Caring responsibilities - those caring were more likely to report feeling lonely.
- Neighbourhood connectedness - those who do not chat to neighbours more than to say hello, or do not feel as though they belong to or were not satisfied with their neighbourhood were more likely to report feeling lonely.
- How often a person meets family members or friends - those who met up once a month or less were more likely to feel lonely.

4.9 **A Connected Society – A Strategy for Tackling Loneliness – Laying the Foundations for Change, 2018**

The Government published its Loneliness Strategy in October 2018. This aims to build upon existing strengths in the public, private and voluntary sector institutions, as well as everyday contributions that people make to their communities. It looks, in turn, at the changes that can be made to organisations, infrastructure and culture.

4.10 The Government vision is for the UK to be a country where everyone can have strong social relationships, where families, friends and communities support each other, especially at vulnerable points where people are at greater risk of loneliness.

4.11 The Strategy recognises that Government cannot make the required changes alone and sets out a powerful vision of how we can all play a role in building a more socially connected society. It acknowledges that there is no quick fix to achieving this vision and states that the Strategy is intended as government's first, rather than its final.

4.12 **Combatting Loneliness – A Guide for Local Authorities, 2016**

This guidance for local authorities was produced jointly by the Local Government Association, Age UK and the Campaign to End Loneliness. The guide sets out a range of actions for effectively combating loneliness building on the latest evidence. Although the focus of the guide is on older people it is considered that the recommendations it makes will be beneficial to other age groups.

¹ Call for Evidence on Approach to Loneliness Strategy, Gov.UK
www.gov.uk/government/consultations/call-for-evidence-on-approach-to-loneliness-strategy, accessed 3/10/18

- 4.13 Actions that it is suggested that local authorities consider taking include:
- Consider 'addressing loneliness' as an outcome measure of council strategies – including the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS).
 - Work at the neighbourhood level, to understand and build on existing community capacity and assets.
 - Recognise and respond to individual needs and circumstances by both making sure general services are geared up to meet the needs of those who are lonely, as well as providing specific interventions as required.
 - Pooling resources and intelligence across organisations and developing new partnerships may increase the benefits for those who are hard to reach or isolated.
 - Do a local needs assessment or intelligence report.
 - Use the loneliness framework from 'Promising Approaches to Reducing Loneliness and Isolation'¹ guide produced by the Campaign to End Loneliness and Age UK.
 - Use the Joseph Rowntree Foundation (JRF) Loneliness Resource Pack to inform action.
- 4.14 **Local Action on Health Inequalities - Reducing Social Isolation Across the Lifecourse, Public Health England, 2015**
- 4.15 The guidance emphasises that social isolation and the relationship with health and inequalities in health is complex and multi-factorial and that consequently, no single sector alone can tackle social isolation comprehensively. Efforts to reduce social isolation require working across organisations and Government departments. This provides opportunities for health and wellbeing boards to encourage partnership work between community and voluntary services, the NHS and local authorities to engage in strategies to reduce social isolation and loneliness in the community.
- 4.16 Learning from local areas and organisations already addressing social isolation shows that much can be done to tackle social isolation using existing community assets, which is considered to be particularly relevant in view of local spending constraints coupled with increasing demands for health and social care.
- 4.17 The guidance provides information to support bodies in local areas, including local authorities, NHS clinical commissioning groups and their stakeholders to develop effective strategies to prevent and reduce social isolation.
- 4.18 **Tackling loneliness and social isolation: the role of commissioners - SCIE Highlights No 3, Social Care Institute for Excellence, 2018**
- 4.19 This looks at work undertaken by the Social Care Institute for Excellence with commissioners, local authorities and third sector representatives to explore the opportunities and barriers faced by commissioners in seeking to address social isolation in older people. Key messages for commissioners included:
- To identify and map existing assets in the local area, which will help to sustain knowledge and build on expertise.

- To make it clearer and easier for smaller organisations to respond to commissioning tenders. Response times and tender requirements should be proportionate to the organisation's size and capacity.
- To promote services which are willing to work closely to produce a seamless offer. This will help avoid duplication, ensure cost effectiveness, and potentially provide routes into areas of poverty and deprivation that will help local authorities tackle other priorities at the same time.
- To invest 'upstream' in the community to reduce the likelihood of people becoming isolated, for example following bereavement.
- To devolve budgets to local area coordinators to free up new approaches within an asset based framework.

Medway's Policy Framework

4.20 Medway Council Plan 2016/17 to 2020/21

The Council Plan 2016/17 to 2020/21 is Medway Council's current Business Plan. This sets out how the Council will ensure that the best possible services are provided for residents. The Plan sets out three priorities, one of which is *Supporting Medway's People to Realise Their Potential*. A number of outcomes are set out for each priority. One of the outcomes for this priority is *Healthy and Active Communities* and one of the stated objectives against this outcome is to reduce social isolation.

4.21 A Strategy to Reduce Social Isolation in Medway (2014-2018)

The Social Isolation Strategy 2014 – 2018, a joint strategy between Medway Council, NHS Medway Clinical Commissioning Group and Healthwatch Medway, was developed with the overarching aim of preventing and reducing the complex range of harms associated with being socially isolated. In order to achieve this aim, the Strategy identified three key strategic themes:

- Raising awareness
- Action for individuals
- Community Action

4.22 A range of targeted actions were identified for each strategic theme, although it was acknowledged that some actions would span all three. For each theme, there was an aspiration to work in partnership to ensure a joined up approach in tackling social isolation. An action plan was developed to support delivery of the Social Isolation Strategy against the three strategic themes.

4.23 Some of the resulting key actions undertaken to address Social Isolation in Medway since publication of the Strategy include those below, listed against each of the three key themes within the strategy. Please note that many of these are covered in further detail in Chapter 8, Summary of Evidence Collected.

4.24 Raising Awareness – Strategic Theme

- Production of a *Stay Connected* booklet. Aimed at over 55's in Medway, this was first published in December 2015 and refreshed most recently in February 2018. More than 5,000 copies of the booklet have been distributed and it is available

for download on the Council website. The booklet, produced by Medway's Public Health team provides information to older people about the support that is available and events that are happening in the community in Medway.

- Social Isolation Awareness Training has been delivered to 88 frontline Medway staff from a number of different Council services as well as to "A Better Medway Champions" and staff at MHS Homes. The training helps to make staff aware of social isolation, how to identify a potentially isolated individual and what action to take.
- A chapter on social isolation has been included in the Medway Joint Strategic Needs Assessment. The chapter highlights local needs in relation to social isolation and loneliness, maps existing provision and gaps and includes evidence of the problem to support the Council in its engagement with partner organisations.

4.25 Action for Individuals – Strategic Theme

- Medway's Public Health team worked with Kent Fire and Rescue on a small social isolation pilot, which commenced in 2016 and ended in late 2017. The aim of the project was to identify socially isolated older people via home safety visits carried out by the fire service and to signpost them to services and support highlighted in the "Staying Connected" booklet. Individuals referred to the intervention received two visits from fire service volunteers to identify and signpost them towards services to support them to stay connected and to follow up on progress made. Throughout the pilot, 63 staying connected booklets were provided to older people. A further 34 people were referred to receive further support. The most requested services by individuals participating in the pilot were befriending and transportation. Qualitative case studies identified a range of support which older people were signposted to for help staying connected through the pilot, including telephone befriending and support with meals.
- Medway Men in Sheds – Delivered by the Sunlight Development Trust and commissioned by Public Health, this service aims to reduce isolation and improve wellbeing among men who are retired or out of work. Regular meetings enable attendees to make connections and friendships, and share their skills during skills based sessions (e.g. carpentry, gardening or music).
- Social Prescribing – Medway Council and Medway Clinical Commissioning Group have commissioned a social prescribing service, with a new service being launched in 2018. Health and care professionals will be able to refer people to a care navigator, for support with their wider non clinical needs. This could include support making connections in their local community. Further work to develop social prescribing in Medway is planned, with the Council bidding for additional funding for a social prescribing project that will aim to reduce social isolation among older people in Medway and which, if successful, could include the creation of a directory of services identifying in house and community opportunities that residents can access. This will build upon existing work already taken by the community and voluntary sector in relation to social prescribing, one example being the range of services available at the Sunlight Centre in Gillingham.

4.26 Community Action – Strategic Theme

- The Council has helped to establish and supported two community interest companies, WALT (Walderslade Together) and wHoo Cares (Hoo Peninsular Cares). These organisations work with vulnerable individuals in their respective areas to support individuals to undertake activities and access services that may be otherwise unable to.
- Big Lunches – this initiative has supported events that promote community connectivity. One example was the Strood Big Lunch 2017. Over 80 people attended the event, including some residents of care homes.

4.27 The aim of this Task Group has been to build upon on the ongoing work already being undertaken by Medway Council and other local organisations to address social isolation and loneliness in Medway. The recommendations arising from the work of the Task Group and the rationale supporting each recommendation is set out in section 8 of this report.

4.28 The Medway Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy

The Government established the Joint Strategic Needs Assessment (JSNA) as a fundamental part of the care planning and commissioning cycle at a local level. The aims of JSNA, as specified by the Government, include that they should provide an evidence base for “all current and future health and social care needs of the entire population”, be “more than just a collection of evidence... and be an analysis and narrative” and provide a “comprehensive picture of place.”

4.29 The Joint Health and Wellbeing Strategy for Medway sets out five key health themes for the area. Four of these are relevant to the need to tackle social isolation and loneliness in Medway. These are:

- Enable our older population to live independently and well
- Prevent early death and increase years of healthy life
- Improve physical and mental health and well-being
- Reduce health inequalities

4.30 The Joint Health and Wellbeing Strategy has been refreshed during 2018. The engagement activity undertaken as part of the refresh identified that some of the key issues to address in Medway included social isolation, the need to develop social prescribing and transport and to address isolation on the Hoo Peninsula.

4.31 Medway Adult Social Care Strategy 2016-20

The development and implementation of the Medway Adult Social Care Strategy aims to inform development in social care provision over the lifetime of the Strategy. It is intended that the aims and strategic direction set out in the Strategy will support the development of integrated commissioning between health providers and the Council and underpin other strategic documents and plans.

4.32 The Strategy sets out six priorities for the delivery of Adult Social Care up until 2020:

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- **Prevention:** Making sure the Medway care and support system works to actively promote wellbeing and independence and does not wait to respond until people reach a crisis point.
- **Participation and Partnerships:** Building strong partnerships to make sure that everything we do is with the participation of service users, carers and key organisations.
- **Personalisation:** Maximising every person's independence, choice and control over their lives.
- **Integration:** There is a clear requirement for care support to be well 'joined up' so that an individual has a clear plan supported by all the agencies working well together.
- **Innovation:** Making the best of the opportunities that new technologies provide.
- **Safeguarding:** Ensuring people are protected from abuse, neglect or exploitation and that their views inform any action taken as much as possible.

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5. METHODOLOGY AND APPROACH

- 5.1 On 10 May 2018, the Task Group met to discuss the background to the review, as well as the review scope and to agree its Terms of Reference. At this point, the group also considered the methodology for the review and agreed to hold a series of round table evidence sessions, thereby providing an opportunity for the participants to get together in an informal setting to examine the issues as they relate to their specific service or organisation.
- 5.2 In addition to the roundtable evidence gathering sessions, a meeting was also arranged with Tracey Crouch MP, the then Minister for Loneliness to find out about the Government's plans to address social isolation and to discuss how councils could play their part in this work. This was the first time that a Government Minister has been actively involved in the work of a Medway Council Task Group.
- 5.3 The Task Group also agreed a visit to Bracknell Forest in order to find out about the significant amount of work undertaken by Bracknell Forest Council and other organisations to address social isolation and loneliness in that area.
- 5.4 Following the first roundtable evidence gathering session with a variety of Council services, it was agreed that further roundtable discussions would be held with locally based public and voluntary sector organisations to find out about work already being undertaken to address social isolation and loneliness and to discuss what further activity could be undertaken and how Medway Council could support this.

Terms of reference

- 5.5 The Task Group agreed the following terms of reference:

To review progress to date in Medway and opportunities to enhance existing work as well as considering the national picture to ensure that Medway's approach is aligned with the emerging national picture.

It is recognised that the voluntary sector and local communities are both critically important to addressing the causes of social isolation and to promoting community connectedness and it will therefore be important to consider the views and contribution of community groups as part of the evidence gathering.

- 5.6 The Task Group also agreed a number of key lines of enquiry to inform its evidence gathering and conclusions:
- i) To define and understand the term social isolation and how it differs from loneliness.
 - ii) To consider national research and guidance on what works to reduce loneliness and social isolation.
 - iii) To review progress against themes identified in Medway's social isolation strategy – 'A Strategy to Reduce Social Isolation 2014-18' and to identify any gaps and arising opportunities.

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- iv) To consider the role of Council services, such as Adult Social Care and other service providers in helping to address social isolation and to identify where Medway Council could provide support and add value.
- v) To consider the role that Medway Councils' key stakeholders can play and possible interventions to address social isolation e.g. health partners, the voluntary sector, other key local institutions and organisations.
- vi) To review the way in which local communities could improve the manner in which they help themselves.
- vii) To investigate the current interventions provided by a range of organisations, including local, regional or national examples and identify ways in which partners and local communities can work together further to address social isolation in Medway.
- viii) To thoroughly investigate social isolation affecting older people and also to consider the impact on younger adults (including young parents).

5.7 The approach, methodology and programme for the review is set out below:

Date	Task Group Members in attendance	Other attendees	Purpose
10 May 2018	Councillors McDonald, Price, Purdy and Wildey	<ul style="list-style-type: none"> • Clare Ebberson - Public Health Consultant – Review Lead Officer • Sharon Greasley - Head of Service, Early Help and Prevention • Chris McKenzie - Assistant Director, Adult Social Care • James Williams - Director of Public Health • Jon Pitt - Democratic Services 	The Task Group received a presentation providing the background to the review. The Task group also determined the scope of the review and its Terms of Reference.
22 June 2018	Councillors Aldous, McDonald, Purdy and Wildey	<p>Witnesses</p> <ul style="list-style-type: none"> • Jenny Bartlett - Mental Health Community Support Outreach • Marc Blowers – Head of Housing Management • Mark Breathwick - Head of Strategic Housing • Rob Carmen - Senior Transport Operations Officer • Bob Dimond - Head of Sport, Leisure, Tourism and Heritage • Sue Ernstzen - Community Link Worker • Gemma Gilley - Benefits Manager • Sharon Greasley – Head of Service, Early Help and Prevention 	The roundtable discussion heard from a number of Council services to find out what actions were already being taken to reduce social isolation and discuss what actions could be taken in the future.

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Date	Task Group Members in attendance	Other attendees	Purpose
		<ul style="list-style-type: none"> • Justine Henderson - Partnership Commissioning • Andrew Mann - Medway Nurse • Duncan Mead - Library Service Manager • Shelly Stagg – Medway Nurse • Julia Thomas - Senior Public Health Manager • Chris White - Head of Libraries, Adult Education and Customer & Business Support <p>Other Attendees</p> <ul style="list-style-type: none"> • Clare Ebberson - Public Health Consultant – Review Lead Officer • Jon Pitt - Democratic Services 	
22 June 2018	Councillors Aldous, McDonald, Purdy and Wildey	<p>Witnesses</p> <ul style="list-style-type: none"> • Tracey Crouch MP, Minister for Loneliness <p>Other Attendees</p> <ul style="list-style-type: none"> • Jon Pitt - Democratic Services • Clare Ebberson - Public Health Consultant – Review Lead Officer • Sharon Greasley – Head of Service, Early Help and Prevention 	To provide the Task Group with an insight into Government thinking and to discuss the role of local authorities in addressing social isolation and loneliness.
25 June 2018	Councillors Aldous, McDonald, Price, Purdy and Wildey	<p>Witnesses</p> <ul style="list-style-type: none"> • Vincent Badu - Kent and Medway NHS and Social Care Partnership Trust • Christine Chetwood - wHoo Cares (wHoo Peninsula Cares CIC) • Jackie Dabin – Imago • Nic Davison - Kent Police • Trudy Donachie - Carer's First • Dalia Halpern-Matthews - Nucleus Arts 	The roundtable discussion heard from a number of partner and voluntary organisations. The aim was to find out what actions were already being taken to reduce social isolation and discuss what actions could be taken in the future both by the Council and by other public sector, voluntary sector organisations and businesses in Medway.

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Date	Task Group Members in attendance	Other attendees	Purpose
		<ul style="list-style-type: none"> • Ruth Hardy - Walderslade Together (WALT) • Tony Harwood – Arriva • Stuart Jeffery - Medway NHS Clinical Commissioning Group • Samantha Jones - Kent Fire and Rescue Service <p>Other Attendees</p> <ul style="list-style-type: none"> • Clare Ebberson – Public Health Consultant – Review Lead Officer • Sharon Greasley – Head of Service, Early Help and Prevention • Jon Pitt - Democratic Services 	
18 July 2018	Councillors Aldous, McDonald, Price, Purdy and Wildey	<p>Witnesses</p> <ul style="list-style-type: none"> • Phil Bungay - Medway Neurological Network • Caroline Clarke - Diocese of Rochester • Cath Foad - Healthwatch Medway • Mike Keen - Samaritans • Julie Millest - Salvation Army (Gillingham branch) • Derek Munton - Medway Pensioners' Forum • Andy Nazer - Campaign to End Loneliness • John Norley – Age UK • Major Ian Payne – Salvation Army (Chatham branch) • Stefan Pichowski – Deafblind Assessment Officer, Medway Council <p>Other Attendees</p> <ul style="list-style-type: none"> • Clare Ebberson – Public Health Consultant – Review Lead Officer • Jon Pitt - Democratic Services 	The roundtable discussion heard from a number of partner and voluntary organisations. The aim was to find out what actions were already being taken to reduce social isolation and discuss what actions could be taken in the future both by the Council and by other public sector, voluntary sector organisations and businesses in Medway.

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Date	Task Group Members in attendance	Other attendees	Purpose
20 July 2018	Councillors Aldous, Price, Purdy and Wildey	<p>Evidence Taken From:</p> <ul style="list-style-type: none"> • Lisa McNally, Director of Public Health – Bracknell Forest Council • Dale Birch - Executive Member for Adult Services, Health and Housing (Deputy Leader of the Council) • Bracknell Forest Public Health team • Speakers and other attendees at the Community Expo <p>Other Attendees</p> <ul style="list-style-type: none"> • Jon Pitt - Democratic Services • Julia Thomas - Senior Public Health Manager 	Visit to a Bracknell Forest Community Expo event to hear about the work undertaken by the Council and the local community to address social isolation and loneliness in Bracknell Forest.
31 August 2018	Councillors Aldous, McDonald, Price, Purdy and Wildey	<p>Witnesses</p> <p>Cllr David Brake – Portfolio Holder for Adults’ Services Cllr Howard Doe – Deputy Leader and Portfolio Holder for Housing and Community Services</p> <p>Other Attendees</p> <ul style="list-style-type: none"> • Clare Ebberson – Public Health Consultant – Review Lead Officer • James Williams – Director of Public Health • Jon Pitt - Democratic Services 	To get the views of the Cabinet Members on how best to address social isolation and loneliness and to discuss the initial findings of the Task Group.
14 November 2018	Councillors McDonald, Price and Purdy	<ul style="list-style-type: none"> • Clare Ebberson – Public Health Consultant – Review Lead Officer • Sharon Greasley – Head of Service, Early Help and Prevention • Chris McKenzie - Assistant Director, Adult Social Care • James Williams – Director of Public Health • Jon Pitt - Democratic Services 	To agree recommendations and the draft report ahead of it being presented to the Health and Adult Social Care Overview and Scrutiny Committee and onwards to Cabinet.

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6. SUMMARY OF EVIDENCE COLLECTED

Supporting the Community

6.1 Supporting and Identifying Socially Isolated people

- 6.1.1 As part of its first round table evidence gathering session, the Task Group heard that there was a potential opportunity to identify people who may be at risk of social isolation or loneliness by making use of Council Tax and housing benefit data. The Council's Benefits service already undertakes work to encourage the public to claim benefits that they are entitled to, one example being the council tax discount available to single people. The service also works with care leavers, who often do not apply for what they are entitled to. It is acknowledged that level of income is a significant factor in determining the risk of someone becoming socially isolated. In view of the fact that it is already known which individuals are in receipt of certain benefits or council tax reduction, it was suggested that this information could be used to identify groups who may be at risk of social isolation and that consideration could be given to including information about social isolation with annual council tax bills and benefit notification letters, particularly for people living on their own. The Task Group has not been able to include the use of council tax data as a recommendation in relation to social isolation and loneliness due to legal restrictions on the use of this data. However, a recommendation has been made that consideration is given to including relevant information when council tax related correspondence is sent out. The Council's Welfare Reform Steering Group has discussed the issue of social isolation and is well placed to support the identification of lonely and isolated individuals.
- 6.1.2 It was suggested that cemeteries were a place where lonely and isolated individuals could be potentially identified. People who had been bereaved, particularly those who had recently lost someone close to them could easily become isolated. While it was acknowledged that not everyone who visited a cemetery on their own would be isolated, or indeed open to interaction with others, it was suggested that cemetery staff or perhaps volunteers could have a role to play in identifying and speaking to people who repeatedly visited a cemetery on their own in order to ascertain whether they felt lonely or isolated and, if so, for staff to signpost to sources of advice and support available. It was also suggested that signage could be installed to provide key contacts for organisations able to provide assistance. It was acknowledged, however, that this would first require the identification of a suitable point of contact.
- 6.1.3 People living on their own and particularly those living in sheltered housing schemes were also groups more likely to be socially isolated than the general population. The Council currently manages 8 sheltered housing units containing circa 280 dwellings. A range of support is provided for residents of sheltered accommodation and work is taking place with housing providers to deliver new forms of accommodation, including the provision of five extra care schemes. Work is undertaken to provide residents of sheltered schemes with the opportunity provided to get out and meet people, such as activity sessions, coffee mornings and coach trips for residents, with these trips also being made available to the wider community. The amount of community work being undertaken was gradually increasing, including joint work with a number of housing providers, while IT and social media training was being provided to

residents of sheltered housing schemes in order to make them more confident in the use of technology to stay in touch. However, residents of sheltered schemes were not generally visited by either staff or by volunteers at weekends and were therefore at increased risk of experiencing social isolation or loneliness during this time.

- 6.1.4 It is recognised that the work of the Community Development team, including work with Council contractor Mears to develop community involvement activities, such as coffee mornings within social housing estates in Medway. It was also acknowledged that there was a need to improve signposting of the offer available and to have sufficient information available in order to be able to effectively promote events to residents.
- 6.1.5 Work is also undertaken to engage younger people living in social housing, one example being arranging community football for younger people. However, such initiatives tended to be aimed at addressing anti-social behaviour rather than social isolation.
- 6.1.6 Overall, 43% of Council tenants are single occupiers and it was therefore suggested that this group could be targeted in any work undertaken to identify and provide information about the support available to those at risk of social isolation.
- 6.1.7 Homeshare schemes¹ involve older people with a spare room being matched with a younger person in need of low cost accommodation, such as a university student. In return, the younger person provides ten hours of household tasks or company per week. A Homeshare Partnership Programme ran in the UK for three years up until May 2018, which included eight individual schemes. A number of other schemes are also in operation. In view of the fact that Medway is home to thousands of students as home to the Universities at Medway campus, it was suggested that the possibility of establishing a scheme in Medway should be explored.
- 6.1.8 The Chatty Café Scheme is a national scheme that provides ‘Chatter and Natter’ tables where customers can sit if they are happy to talk to other customers. The scheme is looking for all types of café, large and small to get involved.² Cafes across the country have joined the scheme including a number of Costa Coffee branches but to date there are no participating cafes in Medway. It was suggested to the Task Group that local cafes be encouraged to participate in the ‘Chatty Café’ scheme. This has clear synergies with the Diocese of Rochester’s Places of Welcome scheme. This involves the establishment of hosted cafes with volunteers seated at each table in the cafe who are designated to engage with visitors, get to know them and help with their needs. A first venue is due to open in Strood with others venues to follow. It was also suggested that local venues could also be encouraged to provide hosted tables on a regular basis for people visiting venues on their own.

¹ Homeshare, Age UK www.ageuk.org.uk/our-impact/programmes/homeshare/ - accessed 01/10/2018

² The Chatty Café Scheme <https://thechattycafescheme.co.uk/> - accessed 3/10/2018

Recommendation 1

That Cabinet asks the Chief Finance Officer to investigate how Council Tax and benefit related correspondence could be utilised to send out information about social isolation and to work with Public Health and Voluntary Sector Partners to identify what information could be provided.

Recommendation 2

That Cabinet requests that Bereavement Services staff should be briefed / trained on how they can signpost service users to appropriate sources of support in relation to social isolation and loneliness.

Recommendation 3

That Cabinet requests that Housing Management / Strategic Housing:

- i) Works with contractor Mears and MHS Homes to further develop community involvement activities within social housing developments in Medway, which aim to promote community connectedness and reduce isolation.**
- ii) Investigates the feasibility of people living in sheltered housing, who are not otherwise visited by friends or relatives on a regular basis, receiving regular weekend visits, linking up with the voluntary sector.**
- iii) Investigates the possibility of establishing a Homeshare scheme in Medway.**

Recommendation 4

That Cabinet requests that Public Health further investigates the 'Chatty Café Scheme' and other similar schemes, including the Places of Welcome Scheme run by the Diocese of Rochester, with a view to encouraging cafes in Medway to participate and to consider whether local venues could be encouraged to offer a similar service.

6.2 Volunteering

6.2.1 Many of the organisations who gave evidence to the Task Group relied on volunteers to provide some or all of their activities. There were a number of initiatives already operational in Medway to encourage volunteering.

6.2.2 A number of volunteer brokerage services exist locally. One such scheme established in Medway is Medway Time Credits. The model is based upon the simple premise that for each volunteering hour an individual contributes they could earn a time credit. This Time Credit can then be spent on accessing an

hour of activity, such as local attractions training courses or leisure or gifted to others.¹

- 6.2.3 Other organisations working locally include Walderslade Together (WALT) and Whoo Cares. These Community Interest Companies (CICs), established with the support of the Council, work with a pool of volunteers to address social isolation. Referrals to WALT and Whoo Cares come from Adult Social Care, other organisations, family and friends of a socially isolated individual or from the individual themselves. Home visits are undertaken with clients to find out if there is any activity that they want to do, that they are currently unable to do and to ascertain if there is any way in which they could be supported to undertake the activity. Clients are supported to attend a range of activities from GP and hospital appointments to leisure activities. Provision is person centred and therefore not the same for everyone. Although WALT and Whoo Cares do not exclude people who live outside the boundaries of Walderslade and the Hoo Peninsula respectively, their work is focused in these areas. It was suggested that consideration be given to supporting existing CICs to expand their offer further to other locations in Medway. This could help to address social isolation and loneliness in other parts of Medway. A number of parts of Medway, such as Cuxton and Halling were highlighted as areas where additional provision could be considered due to there being a lack of community groups locally.
- 6.2.4 It was clear to the Task Group that volunteers have an important role to play in helping to address loneliness and social isolation. However, organisations are struggling to find enough volunteers with the relevant skills. One local voluntary organisation was finding it particularly difficult to attract volunteers who were prepared to act as befrienders to visit an isolated older person in their home on a regular basis. Kent Fire and Rescue Service (KFRS) had undertaken a pilot with Medway's Public Health team, with KFRS having provided significant support to the project. This had included work with volunteers who would interact with people who had been identified as being isolated during a home safety check. KFRS helped to identify people over 55 years old who may be socially isolated, whilst undertaking Safe and Well visits. People meeting the criteria were provided with the Staying Connected directory which gave them a list of local groups and organisations. As a result, 44 people were referred to other agencies for support. Sixteen people were visited by a KFRS volunteer to measure their loneliness scores and talk about the directory. These people were offered up to three visits by a KFRS volunteer, but most people declined additional visits. The pilot had not continued beyond the first year because of a shortage of volunteers available from other agencies. For example, where a referral was required for a befriending service, volunteers were not available and this is not a service provided by Kent Fire and Rescue. The Fire Service is also member of the Social Isolation Implementation group that meets quarterly at Medway Council and is keen to work in partnership with the Council to reduce social isolation.
- 6.2.5 It was suggested that the Council could play a role in promoting volunteering, both to its staff and to the public and that a Medway register of volunteers could be established, if not already in existence. It was recognised that this this would be quite resource intensive to set up and would present a number of challenges. Any such register would need to be led by voluntary organisations but it was suggested that the Council could play a lead role in establishing a register. A

¹ Time Credits www.timecredits.com – accessed 03/10/2018

scheme has already been implemented in Bracknell Forest, which was visited by the Task Group. A Volunteer Passport Scheme has been established. The Scheme has established a volunteering standard across the Borough and makes it easier for people to locate volunteering opportunities. Bracknell Forest and Wokingham Councils were closely involved in establishing the scheme but it is now operated by an independent charitable organisation.

Recommendation 5

That Cabinet requests that Partnership Commissioning investigates the possibility of the Council supporting widening the offer of Community Interest Companies in Medway, such as Walderslade Together and Hoo Peninsula Cares, to enable similar provision for other parts of Medway.

Recommendation 6

That Cabinet requests that Partnership Commissioning, in conjunction with local voluntary sector organisations, universities in Medway and other further education providers, investigates existing volunteer databases and investigates the need for and feasibility of establishing a Medway database of volunteers, if a suitable existing database cannot be identified.

6.3 The Council Leading By Example

- 6.3.1 Although it is clear that there is a significant role for other public sector and voluntary organisations to play in addressing social isolation, it has also been clear during the Task Group's evidence gathering sessions that, the Council can also make a significant contribution through 'Leading by Example', including supporting staff and Councillors to recognise and best support people who are socially isolated, by encouraging other organisations to adopt a similar approach and by also supporting staff who may themselves feel socially isolated or lonely. Not only would such an approach help to support socially isolated individuals, it will also help to give the Council greater influence in the encouragement of other local organisations and businesses to do likewise.
- 6.3.2 A key issue highlighted to the Task Group was that Council services are not always aware of the work being undertaken by other Council services in relation to social isolation and that trying to establish who the best person to contact in another service about an issue related to social isolation could also be difficult. This challenge could be at least partially overcome through the appointment of a social isolation lead officer within each service area with this group of officers then meeting on a regular basis.
- 6.3.3 Medway's Public Health team already delivers a variety of training. This includes A Better Medway Champions training. This training supports individuals (Council staff, community members and partners) to gain the skills to become public health champions in their local communities and workplaces. Through attending the training they develop skills to be able to talk to others about their health and healthy behaviour changes and signpost them to further services for support. A number of the A Better Medway Champions have completed modules covering dementia and social isolation. It was suggested that consideration should be

given to increasing the provision of specific social isolation awareness training for frontline staff. This would help to ensure that staff are able to signpost members of the public to appropriate sources of advice and support. The extension of training would also help make more staff aware of social isolation, how to identify potentially isolated individuals and what action to take.

- 6.3.4 Public Health had done some profiling of social isolation in Medway, which has included mapping the areas where social isolation is a particular issue (see diagrams in section 3 of this report).
- 6.3.5 Another suggestion made to the Task Group was that a provider's plans to address social isolation and loneliness could be taken into account when the Council commissions contracts, including requiring service providers to specifically evidence how they would help to reduce it during the lifetime of the contract. Firms tendering for services would then have an added incentive to ensure that their activities help to address social isolation and loneliness and that their staff are aware of the issue as it would lead to them scoring additional points during the tender evaluation process. A similar recommendation was made, as part of the previous Dementia Task Group, for the dementia awareness of an organisation to be considered as part of the tender process. As a result of this, as new Council contracts are tendered, managers now consider dementia and work with procurement to ensure compliance with this requirement. It is anticipated that something similar could be achieved in relation to social isolation and loneliness.
- 6.3.6 While the commissioning of Council contracts has the potential as a tool to encourage businesses and other organisations to help address social isolation and loneliness, it was also suggested that the Council should consider the impact of social isolation and loneliness across its policies, for its impact to be considered in all aspects of Council business – the so-called 'Golden Thread'. It was suggested that one aspect of this could be including questions in relation to loneliness and social isolation being included in surveys or questionnaires sent out by the Council and that Impact Assessments, which are required to be undertaken ahead of any changes being made to Council policy, should also specifically take loneliness and isolation into account. Organisations would normally already include factors such as gender, diversity, age and disability in such assessments but not loneliness or social isolation.
- 6.3.7 In addition to taking measures to help address social isolation and loneliness amongst the residents of Medway, if an organisation is to effectively lead by example, it is also important that it works to increase connectivity and reduce isolation amongst its own workforce. One suggestion made was that a related question be included in the annual staff survey. The Task Group heard that in one Government Department, staff would turn off their computers early on a Friday afternoon in order to talk to each other about what they were planning to do over the forthcoming weekend.
- 6.3.8 The Council also has an important part to play, through its Public Health function, in promoting good health, with the provision of preventative services being key to improving the health of the local population. As people in poor health are more likely to experience loneliness or social isolation, these services are also important in the tackling of these issues. Work being undertaken in this area is

covered in further detail in the section on raising awareness and promotion of services (see 6.5).

- 6.3.9 As well as taking measures to address social isolation and loneliness, the need to measure it effectively was also highlighted. This could include measuring the current amount of social isolation and loneliness, considering how much it could be reduced by over a set period and then looking at the actions required in order to achieve this. It was considered that further actions such as resident surveys would be one way of further establishing more local information about isolation.

<p>Recommendation 7</p> <p>That Cabinet requests that Departmental Management Teams consider appointing a lead champion for reducing social Isolation and promoting community connectedness for each service area, particularly frontline services and that, led by Public Health, this group of officers meet as a task and finish group.</p>
<p>Recommendation 8</p> <p>That Cabinet requests, that Social Isolation Awareness training is delivered to key frontline staff and that training is offered to Members as part of the Councillor induction process following the next Medway Council elections in May 2019.</p>
<p>Recommendation 9</p> <p>That the Procurement and Partnership Commissioning Teams give consideration to how the Council’s procurement and commissioning arrangements could encourage organisations tendering for Council and jointly commissioned services to ensure that their staff and models of service delivery contribute to the reduction of social isolation and promotion of community connectedness in Medway.</p>
<p>Recommendation 10</p> <p>That information on the impact of Social Isolation and Loneliness be collected as follows:</p> <ul style="list-style-type: none">i) Via a question relating to social isolation / loneliness to be included in the annual staff survey.ii) That opportunities to include the impact of social isolation and loneliness within impact assessments carried out in relation to Council policies be explored.
<p>Recommendation 11</p> <p>That future surveys of Medway residents consider including questions relating to social isolation or loneliness in order to improve data in relation to social isolation amongst population groups in Medway.</p>

6.4 The Role of Councillors

- 6.4.1 In their role as community leaders, Councillors also need to ensure that they have, as a minimum, a basic understanding and awareness of the issues associated with social isolation and loneliness. This is particularly important as Councillors engage with large numbers of residents on a regular basis and in the cases of some isolated people, may be one of the few people that the isolated person has contact with. Councillors, therefore, need to be provided with the knowledge and information to enable them to look out for the warning signs that a person might be isolated and to take appropriate action.
- 6.4.2 During its visit to a Community Expo event hosted by Bracknell Forest Council, the Task Group Members heard that the Council had used both Council meetings and member development sessions to make Councillors aware of the issues relating to social isolation. A presentation had been given to Bracknell's full Council to make councillors aware of the issues around social isolation and the role that they could play. Social Isolation had also been included as a topic at member development sessions. Subject to social isolation awareness training being made available to frontline staff, it is suggested that this is made available to elected Members and that this is included as part of the new Member induction process following the local election due to take place in May 2019 (see recommendation 8 in 6.3).
- 6.4.3 One of the recommendations arising from the previous Task Group that looked at how to make Medway a Dementia Friendly community was for a 'Dementia Ambassador' to be appointed. The Ambassador is a civic role which takes a lead in raising dementia awareness, on behalf of the Council, at external events and functions. The role also involves promoting dementia friendliness within Medway through supporting Councillors and senior managers to lead by example.
- 6.4.4 In common with the previous appointment of a Dementia Ambassador, the Social Isolation Task Group Members consider that the appointment of a similar ambassador to help raise awareness of social isolation and loneliness would assist the Council to play an effective role in helping to overcome the challenges associated with social isolation and loneliness in Medway. However, the Task Group is also clear that all Councillors should have a wider role to play in their communities in helping to identify socially isolated or lonely people and signposting them to appropriate sources of advice and support.
- 6.4.5 The Cabinet Member for Adults' Services has previously been appointed as the Medway Dementia Ambassador. Given the close linkages between social isolation and dementia, it would be logical that the Cabinet Member also be appointed as the Social Isolation Champion. The appointment of a senior Councillor to this role would also further demonstrate how seriously Medway takes its role as a community leader.
- 6.4.6 It is envisioned that the Medway Health and Wellbeing Board would oversee the implementation of the Strategy. In view of this and the wider policy development function of health and wellbeing boards, it is envisioned that the Medway Board will play an active role in overseeing the implementation of the recommendations made by this Task Group e.g. by receiving the six month progress update that is due to be presented to the Medway Health and Adult Social Care Overview and

Scrutiny Committee in Summer 2019. The Board will also consider the impact of social isolation as part of its monitoring of the Medway Joint Health and Wellbeing Strategy. The Board playing an active role is in keeping with Public Health England guidance suggesting that boards encourage partnership work between community and voluntary services, the NHS and local authorities to engage in strategies to reduce social isolation and loneliness in the community.

Recommendation 12

That Cabinet:

- i) Agrees to designate the Cabinet Member for Adults' Services as a Medway Social Isolation Ambassador, who will take the lead in representing the Council at external events and functions relevant to social isolation and loneliness and would promote action to raise awareness of the issues and actions necessary to help tackle social isolation and loneliness in Medway and promote community connectedness.**
- ii) Acknowledges that in addition to the appointment of a Medway Social Isolation Ambassador, all Councillors should play a wider community role in helping to identify socially isolated or lonely people and signposting them to appropriate sources of advice and support.**

Recommendation 13

That Cabinet requests that the Health and Wellbeing Board and the Health and Adult Social Care Overview and Scrutiny Committee both have an active role in monitoring implementation of the recommendations of the Task Group.

Raising Awareness and Promotion of Services

6.5 Social Prescribing and Directory of Services

- 6.5.1 Social prescribing is a means of enabling GPs and other frontline healthcare professionals to refer people to services in their community instead of offering only medicalised solutions. Often the first point of referral is a link worker or 'community connector' who can talk to each person about the things that matter to them. Together they can co-produce a social prescription that will help to improve the health and wellbeing of the individual.
- 6.5.2 The concept of social prescribing is gradually being developed across the UK. It can be particularly beneficial for people who are lonely or isolated; people with mild mental health issues who may be anxious or depressed; and, those who struggle to engage effectively with services. It is also relevant to people with wider social issues such as poverty, debt, housing, relationship problems, all of which impact on their health and wellbeing. Very often these groups have

frequent repeat visits to their doctor or to their local emergency department – effectively trapping them in a ‘revolving door’ of services.¹

- 6.5.3 Medway has already submitted a bid for funding that aims to reduce social isolation among older people in Medway, through social prescribing. If the bid is a success, the intervention will require the creation and maintenance of an up to date and accurate directory of services, including both services provided by the Council and community opportunities that residents can access. Work has already started to map existing directories of services while bearing in mind the challenges associated with keeping them up date and ensuring the quality of services listed in the directory. It is anticipated that the funding would help to overcome these challenges.
- 6.5.4 It has been suggested to the Task Group that the creation of an online directory of services would help to address Social Isolation and Loneliness and that Council staff should have access to this and a list of key contacts to enable them to effectively signpost individuals to a relevant service. Dependent upon the development of social prescribing it may be that staff would refer people to social prescribers or a single contact point rather than directly to an external organisation. In any case, if an online directory of services was made available on the Council website, ensuring that all Council services are aware of it would seem likely to maximise its contribution towards addressing social isolation. The need to create a directory of services is already being addressed as part of the recommissioning by the Council of Voluntary and Community Sector (VCS) Contracts. Part of the specification is for one of the VCS organisations to maintain and publish a directory of services.
- 6.5.5 It was also suggested a number of times during evidence gathering that a single initial point of contact could be established for individuals who felt isolated or lonely. The ‘Three Conversations’² approach that is being implemented in the Council’s Adult Social Care service will identify people who are socially isolated and signpost them to support, including support in the local community. Within Adult Social Care there are two community link workers who are responsible for developing links with the VCS, and ensuring that all staff in the ASC teams are aware of the services that are available. It is suggested, therefore, that a single point of should therefore be via the Council’s normal Adult Social Care contact number.
- 6.5.6 It has been suggested that the software used by the Council’s customer contact centre could incorporate a ‘loneliness tab’ which would list details of organisations that could help people who are isolated or lonely. This would enable staff in either the contact centre or other frontline services to use information to signpost people to relevant sources of advice and support. The Task Group was advised that a similar system is already used in Job Centre Plus. In order to avoid possible duplication of work, the Task Group suggests

¹ Social Prescribing, NHS England - www.england.nhs.uk/personalised-health-and-care/social-prescribing - accessed 2 October 2018

² Three Conversations is an approach to support frontline staff to have three specific conversation with individuals in order to establish their needs and find ways to support people to live independently. The approach had been tried and tested within other local authorities. Conversation 1 is about listening to and connecting with people to establish their aims and the resources available to support these. Conversation 2 involves more intensive working to reflect changes to the situation of the client and also to support reablement, while Conversation 3 considers long term support needs.

that this is further investigated as part of the development of social prescribing and a directory of services. It may be that rather than creating a separate list of services, staff would instead refer people to a directory of services and or an individual contact.

- 6.5.7 On its visit to Bracknell, the Task Group heard about the work that Bracknell Forest Council and partners had undertaken to successfully introduce social prescribing in Bracknell. This work had included employing two full time staff as social prescribers to engage with individuals in order to refer them to appropriate local activities. An interactive display would be created which residents could use to explore the local community groups and activities available. This could be displayed in GP surgeries and other locations to help ensure that people who did not use the internet regularly were aware of the local opportunities. An online directory, known as a community asset map had been created to show the location and details of local community groups and activities. This helps local groups to promote their offer at no cost to them and at minimal cost to the Council. Bracknell also undertakes Warm Welcome Assessments ahead of including a new group on the map to ensure that they have the capacity to accept new members.
- 6.5.8 Local GP practices in Bracknell had signed up to the social prescribing scheme and were able to refer patients who were lonely or isolated to the prescribers and residents were also able to self-refer. The social prescribers would then phone people who had been referred to find out what activities they would be interested in, with a view to referring them to an appropriate local organisation. In addition to the Social Prescribers, Bracknell also employed Community Connectors who were able to work more intensively with a small number of people.
- 6.5.9 Bracknell Forest considered that engagement with local GPs was important to ensure that they are aware of the scheme and are able to refer people to it. The importance of promoting information about social isolation and loneliness and the support available via GPs was highlighted during other evidence gathering by the Task Group.
- 6.5.10 Care Navigators are due to be appointed to work alongside GPs in Medway. Part of their role will be to signpost clients to appropriate services and the role will therefore be key to the successful development of social prescribing in Medway.

Recommendation 14

That Cabinet:

- i) Expresses its support for the development of social prescribing in Medway and of an associated directory of services, subject to appropriate funding being secured and requests that this work is promoted across the Council to enable staff to signpost isolated individuals to appropriate support.**
- ii) Emphasises the importance of ensuring that adequate provision is made for people who are unable or unwilling to access information via the internet e.g. if an online directory of services is developed.**

iii) Requests that consideration be given with regard to whether any in-kind, non-financial support could be provided to local voluntary organisations where their activities or planned activities directly contribute to reducing social isolation or loneliness in Medway.

6.6 Communications and Promotion

- 6.6.1 The general consensus amongst organisations attending Task Group meetings was that, overall, significant work was already taking place to help tackle social isolation and loneliness and that many activities were already available, including within the Voluntary and Community Sector (VCS) However, work was not currently joined up enough between different organisations and there was not enough public awareness of social isolation and associated problems that it causes or of the sources of support and advice already available. It was suggested that opportunities should be explored for a public communications campaign in relation to social isolation and loneliness and that a dedicated person or team should oversee this work. There was also concern about the stigma attached to social isolation and that, therefore, careful consideration needed to be given to the language used in any promotional work undertaken. It was suggested that the Council could act as a coordinator and provide non-financial resources (see recommendation 15 in section 6.5).
- 6.6.2 During its visit to Bracknell Forest, the Task Group heard that local authorities could play an important role in supporting local clubs and voluntary organisations to establish themselves and to promote their activities. Bracknell helped with promotion both online and offline as well as offering other in-kind services to local voluntary organisations, such as printing or help with design. The experience in Bracknell had been that voluntary organisations tended to be looking for support to establish and maintain their offer rather than a cash contribution. A relatively small amount of support provided could make a significant difference to the ability of a voluntary organisation to establish and promote its activities effectively.
- 6.6.3 Medway Council's Public Health team and partner organisations have produced a brochure to provide information to older people about the support that is available and events that are happening in the community in Medway. The booklet, which is aimed at the over 55 age group has been designed to help people stay connected to what is available in Medway. It is acknowledged that as people get older, keeping active or connected to others within the local community can help maintain or improve both physical and mental health. The booklet is broken down into a number of sections and advises residents about activities and services available in Medway and how they can join in. The Medway Citizens Portal at www.mymedway.org also provides some information about activities available in Medway for older people.
- 6.6.4 Witnesses attending Task Group evidence sessions were positive about the Staying Connected Booklet. They emphasised that the Council needed to ensure and continue to ensure that hard copies of the booklet were made available in key places such as cemeteries, funeral directors and at information points. It was also suggested that consideration be given to producing a second version of the brochure targeted at younger adults.

- 6.6.5 It was suggested to the Task Group that society needs to better recognise the valuable contribution that older people could make and encourage them to play an active role in communities and for the opportunities to be available for this to take place. In particular, retirement or otherwise stopping work was a lead cause of isolation, particularly as society could sometimes view those not in work as no longer being able to make a useful contribution. This group could feel detached from the community and that their contribution or potential contribution to society was no longer valued. This situation was described as being a “tragic waste”. One of the other key challenges associated with social isolation and loneliness, particularly amongst older people is the stigma associated with loneliness.
- 6.6.6 It is recognised that addressing the challenge of social isolation and loneliness is a long term challenge and that changing societal attitudes is not something that can be directly addressed by any recommendations set out in this report. What the Council and other organisations can do is to help ensure that all policies and services consider social isolation and how to address this and also to ensure that communications use appropriate language with a view to reducing the stigma and persuading people that it is ok to ask for help.

Recommendation 15

That the Communications and Marketing team investigates the following, subject to resources being available:

- i) Undertaking a public campaign focusing on actions individuals and communities can take to promote community connectedness and contribute to reducing isolation and loneliness.**
- ii) Promotion of activities and events run by local organisations that aim to reduce social isolation and loneliness and connect communities.**

Recommendation 16

That Cabinet requests that Public Health ensures / continues to ensure that copies of the ‘Staying Connected’ booklet are available in key locations, such as libraries, cemeteries / funeral directors and that consideration is given to producing a version of the booklet aimed at younger adults.

Other Key Issues

6.7 Minister for Loneliness

- 6.7.1 The Task Group had the invaluable opportunity of meeting Tracey Crouch, MP for Chatham and Aylesford, who was at the time, the Minister for Loneliness. While a number of the issues discussed are included elsewhere in this report, the Task Group considers it important to highlight the role that the Minister could play in helping to address key issues locally. It was suggested that the Council could provide details of the issues that Medway would like addressed. Some of the specific issues that it was suggested could be raised included the issue of bus

services being reduced or withdrawn, without full evidence gathering having first been undertaken and the challenge that the General Data Protection Regulation (GDPR) presented for the voluntary sector and volunteers.

Recommendation 17

That Cabinet requests that the Council takes opportunities to engage with central Government's work on reducing social isolation and loneliness in Medway, including opportunities to highlight key issues and good practice in Medway.

6.8 Younger People and Carers

- 6.8.1 There tends to be a perception that social isolation and loneliness is something that predominantly affects older adults. There is in fact evidence, as reported by the Office of National Statistics, that young people aged 16 to 24 are statistically more likely to report feeling lonely than older people.¹ New parents, particularly single parents are another group more likely to experience loneliness or social isolation compared to the general population. It was suggested that the increasing use of technology, particularly of mobile phones and social media was causing increased isolation amongst young people as they now have less face-to-face interactions and often interacted with people online who they had not met.
- 6.8.2 Carers and particularly young carers were a group mentioned as being at particular risk of social isolation, especially where a person becomes a carer suddenly. Caring responsibilities could make it difficult for a person to get out of their house, or even to attend school or work and it was suggested that just having someone available to talk to could make a big impact on their life. One source of support available are engagement sessions for carers, run by The Kent and Medway NHS and Social Care Partnership Trust (KMPT). These are also attended by community psychiatric nurses and recovery workers.
- 6.8.3 The Task Group acknowledges that having caring responsibilities can be a significant cause of social isolation and loneliness amongst people of all ages. The Council is currently refreshing its Carers' Strategy and in addition, the next Council Task Group is due to look at support and resources for carers. The Social Isolation Task Group has, therefore, not made any specific recommendations in relation to carers.
- 6.8.4 Young people not in education, employment or training are also more likely to be isolated and it was therefore important to support this group into employment. This concern is being addressed through the implementation of the recommendations of the previous Task Group that looked at Employment Opportunities for 18 to 25 year olds.
- 6.8.5 The Council's Social Isolation Ambassador, if agreed under recommendation 1 of this report, could also have a role to play in promoting loneliness and social

¹ Call for Evidence on Approach to Loneliness Strategy, Gov.UK
www.gov.uk/government/consultations/call-for-evidence-on-approach-to-loneliness-strategy,
accessed 3/10/18

isolation awareness to youth clubs, local schools and via the Medway Youth Parliament.

6.9 BAME Communities

- 6.9.1 It has been suggested that some individuals from some BAME (Black, Asian and Minority Ethnic) communities could be at a greater risk of social isolation due to language or cultural barriers or stigma and an unwillingness to accept help within some communities. Given the diversity of Medway it is considered that there is a need to investigate how social isolation can be tackled within the BAME community.
- 6.9.2 Asylum seekers and refugees are another group who are more likely to be lonely or isolated. The Task Group was advised about a scheme that had been established in a London borough to provide bicycles to women who had recently arrived in the country to enable them to attend job interviews. The provision of these bikes had also helped the women to make new connections in the local community. This was held as one example of a relatively low cost initiative that could make a significant difference to the life of an individual and help to avoid them becoming isolated.
- 6.9.3 The Task Group has not been able to meet with the Medway Ethnic Minority Forum, due to reasons beyond the control of both the Task Group and the Forum, as part of its evidence gathering process. The Task Group considers that this would have offered an important insight into issues affecting these communities and facilitated discussion about possible actions that could be taken. The Task Group would welcome discussion taking place between the Council and the Forum to further discuss the relevant issues.

Recommendation 18

That Cabinet requests that Medway Ethnic Minority Forum be invited to join the Social Isolation Network with a view to discussing ways in which social isolation and loneliness can be addressed amongst BAME (Black, Asian and Minority Ethnic) communities.

6.10 Public Transport

- 6.10.1 Poor public transport links were consistently mentioned as being a contributory factor to and even the lead cause of social isolation and loneliness in Medway. While the major town centres in Medway have rail links and have a relatively well developed bus network, significant concerns were raised about the lack of bus services available in more rural parts of Medway, such as the Hoo Peninsula. There were also concerns that public transport could also be limited in urban areas outside town centres.
- 6.10.2 The Council's Integrated Transport manages supported bus services in Medway. 95% of the local bus network is commercially run, mainly by Arriva. The Council is able to commission services where a specific social need is identified. This is the case for a number of evening and weekend services that are not commercially viable. Integrated Transport also provides older person and

disabled bus passes with there currently being 35,000 older person bus passes and 3-4,000 disabled passes in circulation. The Medway Mobility Service is available for people who have difficulty using ordinary buses. The service, which provides door-to-door journeys, currently had around 900 members. A Villager community transport scheme is also in operation for residents living in the more rural areas of Medway. It is operated by Medway Norse on a not-for-profit basis to provide a range of transport services for Medway's villages, including minibus hire for community groups and regular excursions to a variety of destinations. It was suggested that consideration be given as to how this service could be enhanced or expanded.

- 6.10.3 The services highlighted above and the commissioning of bus services help to enable people to get out of their home and therefore to avoid isolation. However, the cost to the Council is significant with the older person bus passes alone costing the Council £3.5 million per year. Integrated Transport is forecasting an adverse budgetary variance of £615,000 in 2018/19. While this is largely due to a shortfall in income for Traffic Management, subsidised bus services are forecast to overspend by £169,000. Against this backdrop and in view of the wider financial challenges facing the Council it is considered unlikely that the level of subsidies for bus routes in Medway could be increased. One suggestion made that the Task Group recommends be further explored would be to campaign for legislation to ensure that bus companies undertake full evidence gathering before reducing services (see paragraph 6.7 for further details).
- 6.10.4 As well as the availability of transport, there is also a need for transport staff to be able to identify whether a bus passenger is vulnerable, particularly as a bus driver may be one of the few people that an older isolated person has contact with. Arriva has previously provided training to drivers to help them recognise if a bus passenger is vulnerable, but the Task Group was advised that this was not currently being provided in Medway. There was also concern that the staff responsible for training bus drivers may themselves not have enough awareness of social isolation to enable them to train the drivers effectively. Arriva, working with Age UK and the West Kent Befriending Service has started running a 'Talking Bus' from Maidstone to Tenterden which encourages people to talk to one another. It was suggested that a similar service was needed in Medway. It was also suggested that consideration could be given to inviting Arriva to join the Social Isolation Implementation group that meets quarterly at Medway Council with a view to discussing these issues further.

Recommendation 19

That Cabinet recommends that:

- i) Arriva be invited to join the Social Isolation Network with a view to discussing the part it can play in helping to address social isolation and loneliness in Medway.**
- ii) Consideration is given in relation to how the Villager community transport scheme could be enhanced to further address social isolation and loneliness.**

6.11 Use of Technology

- 6.11.1 As set out in paragraph 6.7.1, the increasing use of technology has already being mentioned as a possible cause of social isolation and loneliness amongst young people. Conversely, technology has also being highlighted as having an important role to play.
- 6.11.2 It was suggested that the software used by the Council's customer contact centre could incorporate a 'loneliness tab' which would list details of organisations that could help people who are isolated or lonely. Further details on this are included in paragraph 6.5.6.
- 6.11.3 The potential for technology to help address social isolation and loneliness amongst older people was highlighted to the Task Group. One example given was an older person using e-mail or Skype video calling to enable them to stay in touch with family and friends who may live a long distance away. However, there was a need to ensure that people in this group had the knowledge and confidence to make use of technology effectively and there was also a need to raise awareness of the opportunities available. It was suggested that opportunities could be explored for a pilot to support older people to help address social isolation and loneliness. In view of the fact that libraries are visited by significant numbers of older people and that they already host a range of ICT facilities, the Task Group suggests that libraries be closely involved in the development of any such pilot and that consideration be given to consulting Age UK given its experience in this area. The Task Group was advised that a project in Bexley undertaken by Age UK had involved Year 12 pupils teaching older people how to use computers.
- 6.11.4 The Task Group also noted that the use of technology to address social isolation and loneliness was to a significant extent reliant on the availability of high speed internet connections and on them being affordable. The Task Group wishes to emphasise that while technology can have a role to play, any work undertaken that uses technology to address social isolation and loneliness needs to carefully consider the needs of people who are unable or unwilling to use a computer or the internet.

Recommendation 20

That Cabinet requests that evidence around the role of technology in reducing social isolation is reviewed and opportunities explored for a pilot within Adult Social Care / Public Health.

6.12 Sports and Leisure

- 6.12.1 The Sport, Leisure, Tourism and Heritage service is responsible for Sports centres, community centres and the majority of heritage buildings in Medway. The Medway Park Sports Centre alone attracts 800,000 visitors each year. Identifying centre users at risk of isolation is challenging due to the centre being so busy. However, a variety of programmes to help address the issue were being considered. Hoo Sports Centre had become the first dementia friendly centre with all staff having received training. Signage had also being made dementia

friendly, while an older person's session had been promoted to the community. An attendee at one of these sessions had not previously left their home for two weeks but was now confident to attend the sports centre for other activities due to confidence developed as a result of attendance at the organised sessions.

Summary of Other Evidence

Paragraphs 6.13 to 6.16 summarise evidence gathered by the Task Group that does not directly relate to any of the recommendations set out in this report, aside from a broad recommendation in relation to the voluntary sector. The inclusion of this information in the final report is considered important in view of the fact that one of the concerns raised by a number of the witnesses giving evidence to the Task Group was that there was a lack of communication between organisations regarding their existing offer. It is hoped that inclusion of this evidence can play a small part in helping to address this challenge.

6.13 Library and Adult Education Services

- 6.13.1 People are not always aware of the wide range of services that are provided by libraries. The Council's home library service is provided for people who cannot visit a library in person. Volunteer couriers who help provide the services often build up an ongoing relationship with clients, which for some people may be one of the few regular interactions they have with another person. There are 15 libraries in Medway, with a library being the only Council building in many localities. A mobile library service is also provided for a number of rural and urban locations.
- 6.13.2 Libraries also host a range of activities and events. These include reader groups, which tend to be frequented by older people as well as coffee mornings, knitting groups and a dementia Café. People attending these groups often made friends within the group and tend to interact with the same staff members from week to week. Feedback received suggested that libraries had supported some new parents to leave their house for the first time since the child had been born.
- 6.13.3 The Task Group heard that one key aim of Library services was for them to actively contribute towards reducing social isolation. Libraries are regarded as important assets in the heart of community and the Council is already working to ensure that library staff fully interact with people visiting the library rather than only undertaking the traditional core duties of a librarian.
- 6.13.4 The Council also provides a wide range of Adult Education courses through its Adult Education Centres in Gillingham and Rochester with half of the funding for the service being used for employment and skills. Clients are referred by the Department for Work and Pensions. It was acknowledged that amongst people of working age, supporting a person to find work could be key to reducing the risk of isolation. For those attending an adult education course, the social element of learning could often be as important to the individual as the learning itself.

6.14 Other Council Services

- 6.14.1 The work of the Council's Adult Social Care service is governed by the Care Act 2014. This allows early help and prevention work to be undertaken and for any assessments undertaken to consider the impact of social isolation. The aim is for services to become involved at an early stage before social isolation and loneliness have become entrenched and started to cause additional problems.
- 6.14.2 Working within Adult Social Care, the Mental Health Community Support Outreach team works with people diagnosed with a mental health condition. It is recognised that the social care needs of an individual can be significantly impacted by their mental health and that people with a mental health condition are more likely to become socially isolated or lonely. Social Care Need Assessments are undertaken to identify the need of an individual client with the Outreach team working closely with other Council services and external agencies in order to identify how best to support a person. Care Plans were person centred with service users being given opportunities to participate in wider community activities. This could be as part of a group or via an individual befriender.
- 6.14.3 Partnership Commissioning works with both Adult Social Care and with Medway NHS Clinical Commissioning Group. Commissioning is responsible for market development, working with the voluntary and community sector to stimulate services to meet needs of people who are socially isolated. In view of the fact that Medway has a growing elderly population, a substantial number of whom live on their own or are frail, it is acknowledged that there is a need to consider how more preventative services could be put in place. Currently, GPs are not always aware of the range of existing community programmes on offer but it was anticipated that the forthcoming appointment of Care Navigators to work alongside GPs in Medway would help to address this. The navigators will gather local intelligence and signpost clients to appropriate services and will be key to the development of social prescribing in Medway.
- 6.14.4 The Medway Deaf Services team works with people who have dual sensory loss (hearing and vision). Over 2,500 people in Medway have dual sensory loss, the majority of whom are aged 75 and over. Specialist assessments are provided for this cohort to identify how they can be supported to access services and live as normal a life as possible. Lack of mobility is the leading cause of isolation among this group with reduced mobility having a significant impact on the ability of a person to leave their house, while the biggest impact of dual sensory loss is isolation. Deaf Services is keen to strengthen collaboration with the voluntary sector to help address social isolation and loneliness.

Recommendation 21

That Cabinet commends the significant amount of work to address social isolation and loneliness already taking place across the Council and requests that consideration is given as to how the need to address these challenges could be taken into account as part of departmental service plans.

6.15 Public Sector Organisations

- 6.15.1 Medway Clinical Commissioning Group (CCG) commissions 90% of healthcare for patients in Medway. This includes primary care GPs, community services, secondary care and Kent and Medway NHS and Social Care Partnership Trust (KMPT). It also commissions some services based outside Medway, such as specialist provision in London as well as private sector planned care. The involving Medway team is looking at engagement with hard to reach groups while the Time Credits scheme encourages people to become involved in volunteering activity (see paragraph 6.2.2 for further details). Two care navigation pilots have been commissioned with the service due to go live later in the year (see paragraph 6.5.10). The next stage of this work as part of the Medway Model¹ will see the development of multi-disciplinary teams. Particular attention is being given to frail patients and other high users of healthcare to ensure that the correct care provision is in place.
- 6.15.2 KMPT delivers secondary mental health services. It works with people with dementia and service users including the elderly frail. Broader work includes development of partnerships with the Police and Ambulance service as well as with the education and voluntary sectors to support people who might be isolated and to support people with mental health conditions to re-engage.
- 6.15.3 During 2018/19, work will be undertaken on a concept called Recovery Ecologies. This involves working with partners to use education as a way of engaging and tackling the stigma associated with mental health conditions and looking at how education can be used to help manage long term conditions. KMPT also runs a regional disablement service based at Medway Maritime Hospital. It was recognised that there can be stigma associated with both physical and mental health conditions and that this can contribute to a person feeling isolated. KMPT is one of a number of organisations involved in providing support via a 'recovery college' approach. This involves working with social care, the voluntary sector and with families and carers to co-produce and deliver the approach. This is being piloted in Thanet with KMPT looking to work with partners to see how the approach could support people in Medway and Kent.
- 6.15.4 The Community Street Triage Service, piloted in Medway by KMPT, involves mental health practitioners working directly with the Police and with ambulance staff to provide support to people with particular mental health needs. Work is also undertaken with people who make frequent contact with mental health services in order to identify how they can be best supported.
- 6.15.5 Kent Police employs an Adult Intervention Officer for Medway, who is also a Police Community Support Officer (PCSO). This role involves managing and safeguarding vulnerable adults, managing their expectations and navigating

¹ The Medway Model is a new way of joining up local health and care services so that, where appropriate and possible, they can be delivered closer to people's homes. We know that most people, when given a choice, want to stay out of hospital and receive care either in their own home or in their neighbourhood. When someone is ill, there are so many more people involved in their care than just the patient and their GP, so the aim is to bring services together in six locations across Medway to enable health and care staff to work more closely together and develop services that focus on patients. Further details of the model and the wider Kent and Medway Sustainability and Transformation can be found on the following websites - Medway NHS CCG - www.medwayccg.nhs.uk and the STP website <http://kentandmedway.nhs.uk>

them to appropriate sources of support whilst ensuring that they are safeguarded.

6.16 The Voluntary Sector

- 6.16.1 **Carers' First** – The main role of Carers' First is to support carers. Current projects highlighted to the Task Group included support for younger adult carers aged 18-24, a younger carer project and a pilot project for care navigators. Carer's First already runs a number of support groups. Some are for people with specific needs, while others are more generic. Monthly drop in sessions take place at Jobcentre Plus and at the local university campus. Social trips are also organised for carers and a telephone befriending system has been established with support also available via the Carers First website. Other activities include swimming sessions provided in partnership with Medway Council and supporting the Civil Service Bowls Club.
- 6.16.2 **Imago** - Supports a range of clients, carers and families. One aim of the organisation is to identify social isolation within the client group and to navigate people to services that meet their needs. Social isolation is acknowledged to be a significant problem for elderly clients but it also affects younger people. Some clients are in crisis, having become completely isolated and feeling that they have no one to turn to.
- 6.16.3 **Nucleus Arts Centre** - An independent charity based in Medway with all services being provided locally. A significant amount of work had been undertaken in relation to social isolation and loneliness. People the charity works with range from young children to those at the end of their life. The main programme provided is called Art Inclusive. Nucleus Arts uses creativity and the arts to remove barriers. The Young at Art programme is available to the over 55s while the Social Art programme is available to anyone aged 18 plus. There had been a noticeable positive change observed in the majority of people attending regularly. Nucleus also runs a number of events. These have included an Arts Festival and a community festival, 'Diversity Through Creativity.' Many of the participants in these events had physical or mental health difficulties or had felt isolated. Work was also undertaken with people who had lost their partner or those who had retired and subsequently felt isolated. The respondent also commented on challenges to Arts organisations as a result of not being eligible for business rate relief. It was recognised that this is as a result of national policy/rules around business rate relief.
- 6.16.4 **The Campaign to End Loneliness** - A national organisation which campaigns and undertakes research to address loneliness. The majority of the work undertaken is with central Government but the Campaign also works with local government. 93% of local authorities had used research data provided by the Campaign.
- 6.16.5 **Age UK Medway** - Age UK has been working with socially isolated older people for at least 45 years. It was considered that there was not enough funding available locally to be fully effective in addressing social isolation and loneliness and that, therefore, there was a danger that levels would increase. Age UK was working in partnership with Homestart to deliver a project attached to the Dementia Centre in Chatham. This would bring together younger and older

people living with dementia and was due to start in September 2018. Mums would be encouraged to visit the centre with their children to interact with dementia patients. Community Ambassadors were due to be appointed in 2018/19 with their role being to increase awareness of the services available from Age UK. Newly recruited volunteers would have a role in signposting isolated older people to appropriate services. A new service, 'the Wishing Washing Line' aimed to tackle social isolation by matching up people who wish to do a particular activity with those who are already participating in the activity. The Age UK representative also commented on challenges in relation to the availability of funding to voluntary/community sector organisations. It was recognised that this is a national issue.

- 6.16.6 **Healthwatch Medway** - Helps to signpost the public to appropriate organisations and to help people to understand local health issues and problems. One recent example of this Kent and Medway Stroke Services consultation, for which Healthwatch had supported people to give their views on the proposals.
- 6.16.7 **Medway Pensioners Forum** - Enables older people to come together on a self-selecting basis. Monthly meetings are held on a series of topics that are of interest to older people. The Forum also produces a bi-monthly magazine which is sent to all members.
- 6.16.8 **The Diocese of Rochester** - Covers 300 churches across the London Boroughs of Bromley, Bexley, North and West Kent and Medway. The Diocese undertakes a variety of community engagement, including homes projects, debt advice and provision of food banks. It runs social isolation projects and dementia cafes, drops in sessions, advice centres and children's clubs. It is one of the few organisations to have buildings located in almost every town and village. The Diocese would be opening places of welcome, a church open fund project for people who have moved into an area where they do not know anybody. It had recently launched the Princess Project. This was aimed at young mums under the age of 30 who were feeling isolated. A number of befrienders had recently been trained. They were currently working in the Luton area of Chatham but would ultimately cover the whole of Medway. The befrienders engage with mums through taking them out for coffee.
- 6.16.9 **Medway Neurological Network** - An umbrella community group for neurological support groups and charities active in Medway. The Network has been campaigning for the creation of a central neurological hub in Medway. The mission of the Network is to improve the quality of health and social care and create awareness of neurological conditions. Current activities include the singular movement group, Grain Neurological Café and hosting a drop in cafe. It also works with the Diocese of Rochester and Methodist Church in Lower Stoke to run a Dementia and Memory Café in Cliffe and Parkinsons Café in Hoo and has worked with Medway Adult Education to create a new arts event. The Network is represented on a number of health boards and campaigns on a variety of neurological issues.
- 6.16.10 **The Salvation Army** – One cause of isolation was that different generations of families now tend to be geographically separated rather than living in the same area. The Salvation Army Chatham branch had 150 to 200 visitors each Sunday. Salvation Army activities helped different generations to engage with each other.

This included running a mentoring partnership with the church. It was also running a programme with homeless people. The Gillingham branch operates a range of activities across all age ranges. This includes a cameo Club for older people and a pre-school, the latter also enabling engagement with parents.

- 6.16.11 **Samaritans** – The core work of the Samaritans involves listening to people’s problems, with there being a common misconception that most of the people supported by the Samaritans are suicidal. Samaritans engages with a variety of local organisations and with schools and children. It had attended meetings at neurological cafes in Gravesend and Borstal. This had enabled engagement with carers, who were often very isolated. The Samaritans had also been contacting the families of missing people to see how they can be supported. Listening programmes ran in prisons with prisoners trained to be listeners. Each section within Rochester Prison also has a dedicated phone that connects to the Samaritans for any prisoner who feels unable to talk to their own listener. There are around 200 branches of the Samaritans in the UK with an average of 100 people being supported by each branch. Samaritans Strood is one of the smaller branches which supports around 70 people. Besides telephone support, Samaritans also provides face-to-face, e-mail and text message support.

Recommendation 22

That the voluntary sector in Medway be encouraged to continue working with the Council to reduce social isolation, for example by attending the Social Isolation Network and supporting the Government Strategy and public campaigns aimed at reducing isolation.

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7. CONCLUSIONS AND RECOMMENDATIONS

- 7.1 The Government published its first Loneliness Strategy in October 2018, *A Strategy for Tackling Loneliness – Laying the Foundations for Change*. As part of its evidence gathering, the Task Group was fortunate to have the opportunity to meet Tracey Crouch, MP for Chatham and Aylesford and the then Minister for Loneliness to discuss the national picture and the role that local authorities could play in this work.
- 7.2 The Task Group is reassured that the Strategy emphasises the importance of many of the initiatives already taking place or planned in Medway, such as the development of social prescribing and that the Strategy also recognises the role of local authorities in tackling loneliness through strategic planning and decision making. It is suggested that this could include recognising the issue through Health and Wellbeing Boards, which is a recommendation of the Task Group's report.
- 7.3 As the Strategy was published after the conclusion of the Task Group's evidence gathering, the Task Group has not been able to review the Strategy in the context of the recommendations and implications for Medway. The Task Group, therefore recommends that the national Strategy is reviewed against the recommendations and existing work in Medway to address social isolation and loneliness, in order to seek alignment with the emerging national picture, to identify gaps and ensure that unnecessary duplication is avoided.

Recommendation 23

That Cabinet requests that the Social Isolation Network reviews the national strategy against actions taking place in Medway and identifies any gaps for possible actions to be further investigated by the Council / partners.

- 7.4 The Task Group has reviewed the wide range of existing work that helps to address social isolation and loneliness in Medway. There is a significant amount of activity already taking place across the Council and local public and voluntary sector organisations. However, this work is not always as joined up as it could be with a key finding of the review being that the Council and other local organisations need to strengthen communications and awareness raising of the local offer and to develop a more cohesive and collaborative approach to ensure that the challenge of social isolation and loneliness is addressed effectively.
- 7.5 It is clear that the Council can make a significant contribution to addressing social isolation and loneliness in Medway, with for example, a recommendation made by the Task Group being for more key frontline staff and Councillors to receive social isolation awareness training. It is hoped that the Council playing a lead role in this agenda will encourage local public and voluntary sector organisations and the business community to play a pro-active role in

addressing social isolation and loneliness and increasing community connectivity. A Social Isolation Network already meets regularly at the Council with it being envisioned that this will have an important role to play in increasing local connectedness and bringing partners together.

7.6 Full list of Task Group Recommendations

Recommendation 1

That Cabinet asks the Chief Finance Officer to investigate how Council Tax and benefit related correspondence could be utilised to send out information about social isolation and to work with Public Health and Voluntary Sector Partners to identify what information could be provided.

Recommendation 2

That Cabinet requests that Bereavement Services consider how to engage, with appropriate sensitivity, with individuals observed to repeatedly visit Medway cemeteries alone, in order to establish whether the person feels isolated or lonely and if so, to signpost them to appropriate services, for example those in the Staying Connected resource.

Recommendation 3

That Cabinet requests that Housing Management / Strategic Housing:

- i) Works with contractor Mears and MHS Homes to further develop community involvement activities within social housing developments in Medway which aim to promote community connectedness and reduce isolation**
- ii) Investigates the feasibility of people living in sheltered housing, who are not otherwise visited by friends or relatives on a regular basis, receiving regular weekend visits, linking up with the voluntary sector.**
- iii) Investigates the possibility of establishing a Homeshare scheme in Medway.**

Recommendation 4

That Cabinet requests that Public Health further investigates the 'Chatty Café Scheme' and other similar schemes, including the Places of Welcome Scheme run by the Diocese of Rochester, with a view to encouraging cafes in Medway to participate and to consider whether local venues could be encouraged to offer a similar service.

Recommendation 5

That Cabinet requests that Partnership Commissioning investigates the possibility of the Council supporting widening the offer of Community Interest Companies in Medway, such as Walderslade Together and Hoo Peninsula Cares, to enable similar provision for other parts of Medway.

Recommendation 6

That Cabinet requests that Partnership Commissioning, in conjunction with local voluntary sector organisations, investigates existing volunteer databases and investigates the need for and feasibility of establishing a Medway database of volunteers, if a suitable existing database cannot be identified.

Recommendation 7

That Cabinet requests that Departmental Management Teams consider appointing a lead champion for reducing social Isolation and promoting community connectedness for each service area, particularly frontline services and that, led by Public Health, this group of officers meet as a task and finish group.

Recommendation 8

That Cabinet requests that Social Isolation Awareness training is delivered to key frontline staff and that training is offered to Members as part of the Councillor induction process following the next Medway Council elections in May 2019.

Recommendation 9

That the Procurement and Partnership Commissioning Teams give consideration to how the Council's procurement and commissioning arrangements could encourage organisations tendering for Council and jointly commissioned services to ensure that their staff and models of service delivery contribute to the reduction of social isolation and promotion of community connectedness in Medway.

Recommendation 10

That information on the impact of Social Isolation and Loneliness be collected as follows:

- i) Via a question relating to social isolation / loneliness to be included in the annual staff survey.**
- ii) That opportunities to include the impact of social isolation and loneliness within impact assessments carried out in relation to Council policies be explored.**

Recommendation 11

That future surveys of Medway residents consider including questions relating to social isolation or loneliness in order to improve data in relation to social isolation amongst population groups in Medway.

Recommendation 12

That Cabinet

- i) Agrees to designate the Cabinet Member for Adults' Services as a Medway Social Isolation Ambassador, who will take the lead in representing the Council at external events and functions relevant to social isolation and loneliness and would promote action to raise awareness of the issues and actions necessary to help tackle social isolation and loneliness in Medway and promote community connectedness.**
- ii) Acknowledges that in addition to the appointment of a Medway Social Isolation Ambassador, all Councillors should play a wider community role in helping to identify socially isolated or lonely people and signposting them to appropriate sources of advice and support.**

Recommendation 13

That Cabinet requests that the Health and Wellbeing Board and the Health and Adult Social Care Overview and Scrutiny Committee both have an active role in monitoring implementation of the recommendations of the Task Group.

Recommendation 14

That Cabinet:

- i) Expresses its support for the development of social prescribing in Medway and of an associated directory of services, subject to appropriate funding being secured and requests that this work is promoted across the Council to enable staff to signpost isolated individuals to appropriate support.**
- ii) Emphasises the importance of ensuring that adequate provision is made for people who are unable or unwilling to access information via the internet e.g. if an online directory of services is developed.**
- iii) Requests that consideration be given with regard to whether any in-kind, non-financial support could be provided to local voluntary organisations where their activities or planned activities directly contribute to reducing social isolation or loneliness in Medway**

Recommendation 15

That the Communications and Marketing team investigates the following, subject to resources being available:

- i) Undertaking a public campaign focusing on actions individuals and communities can take to promote community connectedness and contribute to reducing isolation and loneliness.**
- ii) Promotion of activities and events run by local organisations that aim to reduce social isolation and loneliness and connect communities.**

Recommendation 16

That Cabinet requests that Public Health ensures / continues to ensure that copies of the 'Staying Connected' booklet are available in key locations, such as libraries, cemeteries / funeral directors and that consideration is given to producing a version of the booklet aimed at younger adults.

Recommendation 17

That Cabinet requests that the Council takes opportunities to engage with central Government's work on reducing social isolation and loneliness in Medway, including opportunities to highlight key issues and good practice in Medway.

Recommendation 18

That Cabinet requests that Medway Ethnic Minority Forum be invited to join the Social Isolation Network with a view to discussing ways in which social isolation and loneliness can be addressed amongst BAME (Black, Asian and Minority Ethnic) communities.

Recommendation 19

That Cabinet recommends that:

- i) Arriva be invited to join the Social Isolation Network with a view to discussing the part it can play in helping to address social isolation and loneliness in Medway.**
- ii) Consideration is given in relation to how the Villager community transport scheme could be enhanced to further address social isolation and loneliness.**

Recommendation 20

That Cabinet requests that evidence around the role of technology in reducing social isolation is reviewed and opportunities explored for a pilot within Adult Social Care / Public Health.

Recommendation 21

That Cabinet commends the significant amount of work to address social isolation and loneliness already taking place across the Council and requests that consideration is given as to how the need to address these challenges could be taken into account as part of departmental service plans.

Recommendation 22

That the voluntary sector in Medway be encouraged to continue working with the Council to reduce social isolation, for example by attending the Social Isolation Network and supporting the Government Strategy and public campaigns aimed at reducing isolation.

Recommendation 23

That Cabinet requests that the Social Isolation Network reviews the national strategy against actions taking place in Medway and identifies any gaps for possible actions to be further investigated by the Council / partners.

Bibliography

Age UK

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www.ageuk.org.uk/information-advice/health-wellbeing/loneliness/

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www.gov.uk/government/consultations/call-for-evidence-on-approach-to-loneliness-strategy

Jo Cox Loneliness Commission (December 2017)

Combatting Loneliness One Conversation at a Time – a Call to Action

www.jocoxloneliness.org

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Combatting Loneliness – A Guide for Local Authorities (January 2016)

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How do you Know Your Council is Tackling Loneliness? (June 2018)

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Medway Council

Medway Adult Social Care Strategy 2016-20

www.medway.gov.uk/carehealthandsupport/socialcareconsultations/adultsocialcaredelivery.aspx

Medway Council and NHS Medway Clinical Commissioning Group

Medway Joint Health and Wellbeing Strategy (November 2012 – published document / draft refresh July 2018)

www.medwayjsna.info

Medway Council / Medway NHS Clinical Commissioning Group

(December 2014)

A Strategy to Reduce Social Isolation 2014-2018

<https://democracy.medway.gov.uk/mgconvert2pdf.aspx?id=25306>

Diversity impact assessment

TITLE Name / description of the issue being assessed	Task Group – The Impact of Social Isolation in Medway
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DATE Date the DIA is completed	29/11/18
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LEAD OFFICER Name, title and dept of person responsible for carrying out the DIA.	Clare Ebberson, Public Health Consultant
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1 Summary description of the proposed change

- What is the change to policy / service / new project that is being proposed?
- How does it compare with the current situation?

Implementation of 22 recommendations that it is anticipated will help to reduce the impact of social isolation and loneliness in Medway. The recommendations aim to complement existing work and strengthen partnership working between the Council, other public sector organisations, the voluntary sector and local businesses.

2 Summary of evidence used to support this assessment

- Eg: Feedback from consultation, performance information, service user records etc.
- Eg: Comparison of service user profile with Medway Community Profile

Evidence collected at three roundtable evidence sessions attended by range of Council services, public sector and voluntary sector organisations; Meeting with Tracey Crouch, local MP and the then Minister for Loneliness; Best practice visit to Bracknell Forest; Meeting with Cabinet Members for Adults’ Services and the Deputy Leader and Portfolio Holder for Housing and Community Services; public health data; range of other documents as set out in bibliography of Task Group report.

3 What is the likely impact of the proposed change?
Is it likely to :

- Adversely impact on one or more of the protected characteristic groups?
- Advance equality of opportunity for one or more of the protected characteristic groups?
- Foster good relations between people who share a protected characteristic and those who don’t?

(insert ✓ in one or more boxes)

Protected characteristic groups (Equality Act 2010)	Adverse impact	Advance equality	Foster good relations
Age		✓	✓
Disability		✓	✓
Gender reassignment			

Diversity impact assessment

Marriage/civil partnership			
Pregnancy/maternity			
Race			
Religion/belief			
Sex			
Sexual orientation			
Other (eg low income groups)			

4 Summary of the likely impacts

- Who will be affected?
- How will they be affected?

The recommendations of the Task Group report are wide ranging. It is anticipated these recommendations will have a positive impact on people who already, or at risk of becoming lonely or socially isolated, irrespective of whether they have any protected characteristic. Older people and people living with disabilities, have been identified as groups who are more likely to be lonely or isolated. Implementation of the recommendations is more likely to have a positive impact on these groups.

5 What actions can be taken to mitigate likely adverse impacts, improve equality of opportunity or foster good relations?

- What alternative ways can the Council provide the service?
- Are there alternative providers?
- Can demand for services be managed differently?

No likely adverse impacts have been identified at this stage. Any possible adverse impact will need to be monitored as each recommendation is implemented. Much work is already being undertaken to address social isolation and loneliness in Medway. This could continue without the Task Group report being agreed, but work would be less likely to be joined-up and outcomes not as good.

Diversity impact assessment

6 Action plan

- Actions to mitigate adverse impact, improve equality of opportunity or foster good relations and/or obtain new evidence

Action	Lead	Deadline or review date
Consider impact of specific recommendations as they are implemented	Public Health	Ongoing
Six month update to Health and Adult Social Care Overview and Scrutiny Committee	Public Health / Democratic Services	August 2019
Report to be presented to Health and Wellbeing Board / ongoing engagement with Board and Social Isolation and Loneliness		February 2019 / Ongoing

7 Recommendation

The recommendation by the lead officer should be stated below. This may be:

- to proceed with the change, implementing the Action Plan if appropriate
- consider alternatives
- gather further evidence

If the recommendation is to proceed with the change and there are no actions that can be taken to mitigate likely adverse impact, it is important to state why.

There is no current evidence of adverse impacts requiring mitigation. It is therefore recommended to proceed with the proposed recommendations.

8 Authorisation

The authorising officer is consenting that:

- the recommendation can be implemented
- sufficient evidence has been obtained and appropriate mitigation is planned
- the Action Plan will be incorporated into the relevant Service Plan and monitored

Assistant Director

James Williams

Date

29th November 2018

Contact your Performance and Intelligence hub for advice on completing this assessment

RCC:	phone 2443	email: annamarie.lawrence@medway.gov.uk
C&A (Children's Social Care):	contact your usual P&I contact	
C&A (all other areas):	phone 4013	email: jackie.brown@medway.gov.uk
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